

## LTC ACO Team Message

As PY25 comes to a close, our team has been reflecting on the progress made across our participating practices and the meaningful work happening every day in long-term care. This past year showed what's possible when dedicated providers and care coordination teams come together around shared goals. The insights below reflect not just our team's perspective, but the impact you've created through your commitment to high-quality, patient-centered care.

### STRENGTHENING PARTNERSHIPS

In 2025, we learned even more about the challenges and needs of our participating practices. Your openness and collaboration shaped where we focused support, and we look forward to building on this foundation in PY26 helping translate your quality efforts into meaningful results for patients and providers.

### MAKING AN IMPACT

Our annual Partner Experience Survey showed the strengths of our collective work. The feedback you provided helps us understand what is most valuable to your teams and where we can continue improving together to support better care and outcomes.

### COMMUNICATION AND CULTURE

This year reaffirmed the commitment we see from partners across the ACO. Your resilience, transparency, and willingness to engage in tough conversations helped us navigate challenges and stay aligned around what matters most: doing right by the people and teams we serve.

### BUILDING READINESS

2025 showed the impact of working together. Your engagement during our implementation and performance year kick-offs helped create a shared sense of readiness and community as we enter the new performance year.

### DATA AND INSIGHT

Partner practices engaged thoughtfully with our data and insights, using them to make informed, data-driven decisions and explore new strategies for care. These efforts demonstrate your commitment to proactive, patient-centered approaches and give providers confidence in navigating complex needs.

### ADVANCING CARE

Your collaboration this year helped us shape the clinical tools and reports that truly support your work. In 2026, we look forward to launching a new clinical platform designed around the needs and workflows of participating practices, offering clear timelines, targeted insights, and practical resources to strengthen care delivery.

As we enter PY26, we want to thank our ACO partners for your dedication, partnership, and shared commitment to improving care for the population we serve. We're grateful for the trust you place in us and we are excited to continue this work together. Wishing everyone a happy holiday season and a successful new year!

## GET TO KNOW:

## Brittain Brantley, Chief Operating Officer

We are pleased to introduce Brittain Brantley, LTC ACO's Chief Operating Officer. With more than 15 years of experience across clinical operations, population health, analytics, and national health policy, Brittain brings a blend of strategic insight and operational discipline that aligns closely with the mission of LTC ACO.



## WHAT INSPIRED YOU TO JOIN LTC ACO?

I was inspired to join LTC ACO because it aligned perfectly with both my professional mission and my personal values. I've spent my career focused on improving population health for individuals who are often overlooked. The organization's focus on long-term care residents, its commitment to value-based care, and its emphasis on data-driven clinical management were uniquely compelling to me. The ability to bring together analytics, care management, and practice support to improve outcomes for one of the most vulnerable patient groups felt like a mission I was built for.

## WHAT ARE YOUR TOP PRIORITIES FOR THE ACO IN YOUR FIRST YEAR?

My first priority is to be an advocate for the mission that has produced successful results year over year. Importantly, that includes elevating provider engagement and support. Our partners need actionable solutions, and my goal is to deepen relationships across our ACO that foster solutions engineering and knowledge sharing. Second, my focus is on strengthening core operations to create consistent, scalable processes. Third, I want to enhance our strong data ecosystem by investing in an integrated analytics ecosystem that empowers operational insights and accessibility for our partners.

## WHAT'S ONE LEADERSHIP LESSON YOU ALWAYS COME BACK TO?

Leaders eat last. The best solutions almost always come from the people closest to the work, and my job as a leader is to create the conditions for them to succeed. Critically, putting the needs of the team first, removing barriers, and making sure they have the clarity, resources, and support to do their best work.

## WHAT'S A BOOK, PODCAST, OR HABIT THAT'S SHAPED YOUR APPROACH TO LEADERSHIP?

*Nudge* by Richard Thaler and Cass Sunstein. It shaped the way I think about how people make decisions. More importantly, it taught me how leaders can design environments that make good decisions easier.

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*Outside of the office, he spends as much time as possible with his wife and two young sons. He's happiest outdoors - whether playing tennis, golfing, fishing, or hunting - and he has set a 2026 goal of completing his first ultramarathon.*

*Brittain looks forward to connecting with each of our participating practices and building the relationships that will support your success in the year ahead. We're excited for the energy, partnership, and perspective he brings to LTC ACO.*

## Quality Updates

As we approach the end of PY25, it is imperative that remaining quality gaps are addressed and documentation is completed. Quality measure performance directly impacts the percentage of shared savings earned by the ACO and by participating providers.

**CMS has finalized the 2026 Physician Fee Schedule Rule which includes the following 5 provider-facing measures:**

- ◆ Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)
- ◆ Hypertension: Controlling High Blood Pressure
- ◆ Screening for Depression and Follow-up Plan
- ◆ Breast Cancer Screening
- ◆ Colorectal Cancer Screening \*New for 2026

CMS is anticipated to release the Measure Specifications in late December. Once available, details will be shared with all participating groups. Based on 2025 guidance, we anticipate that LTC patients >65 years old will continue to be excluded from the Diabetes, Hypertension, Breast Cancer Screening, and Colorectal Cancer Screening measures.

### MAXIMIZING QUALITY PERFORMANCE IN PY26

To maximize quality performance, measures should be addressed early in the performance year. Early completion helps avoid missed opportunities due to patient discharge, transfer, or death.

#### ◆ Depression Screening & Follow-up Plan:

- » Depression Screening should be completed and documented for all LTC ACO patients at the first clinically appropriate provider visit of the year. Patients will qualify for this measure at their first visit of the year. If screening is not completed and the patient discharges or passes away, performance will be negatively impacted.

#### ◆ Glycemic Status Assessment (<9%)

- » An A1C should be completed and documented on diabetic patients within the first 6 months of the year, as clinically appropriate.

#### ◆ Controlling Blood Pressure (<140/90)

- » The most recent blood pressure should be documented within each provider visit.

#### ◆ Breast Cancer Screening and Colorectal Cancer Screening

- » Billing data will be analyzed for any completed screenings that meet the measure. Provider documentation is required for measure compliance.

*Measure reporting for PY26 will begin April/May, once denominators are established using billing data.*

## Regulatory Updates

CMS released the **2026 Calendar Year Medicare Physician Fee Schedule (PFS) and Quality Payment Program (QPP)** final rule on October 31, 2025, with most policies taking effect on January 1, 2026. This rule updates 2026 payment rates for physicians and other healthcare professionals, revises telehealth policies, refines the Shared Savings Program (SSP), finalizes a new Innovation Center mandatory model for ambulatory specialty care, and modifies policies for the QPP's 2026 performance year.

Highlights of the policies related to the PFS include implementation of **two conversion factor (CF) increases; a CF of 3.77% for APM participants and 3.26% for non-participants**. These include a 0.49% adjustment to account for budget neutrality and a one-time 2.5% upward adjustment passed by Congress in the budget reconciliation package (HR1).

The policy also implements a change to Indirect Practice Expense (PE) RVUs. This will be impactful for practitioners providing services in the long-term care space to beneficiaries while on a Part A Stay (receiving skilled services or POS 31). The payments for these services will be impacted by a reduction in the indirect PE RVUs, thus resulting in reduction in reimbursement. Therefore, getting the place of service correct on the claims will become even more significant to ensure accurate reimbursement and lessen revenue loss inadvertently.

While the rule includes new policies regarding telehealth, Congress has passed another extension to telehealth flexibilities through January 30, 2026. If Congress does not act by this time, the new policies will take effect on January 31, 2026.

The rule also includes policy for suppression of electronic case reporting for the 2025 performance year as part of Promoting Interoperability reporting requirements. While this component is being suppressed, the attestation must still be addressed during reporting to receive credit under the suppression.

**To see more detail regarding LTC ACO highlights of the 2026 PFS and QPP Final Rule, please refer to the correspondence located in the Clinical Resource Portal (PY26 Kick-Off)**

**VISIT THE PORTAL**

## Clinical Spotlight

We close out the 2025 Performance Year grateful for our shared achievements and energized for the year ahead. One of the most meaningful measures of our shared success came from the final 2024 settlement results: an Inpatient Hospital Admissions Per Thousand (APK) rate of 500, which is 37–54% lower than other ACOs serving long-term care populations. This achievement is a reflection of the thoughtful care management and coordination efforts led by all of you, our ACO partners.

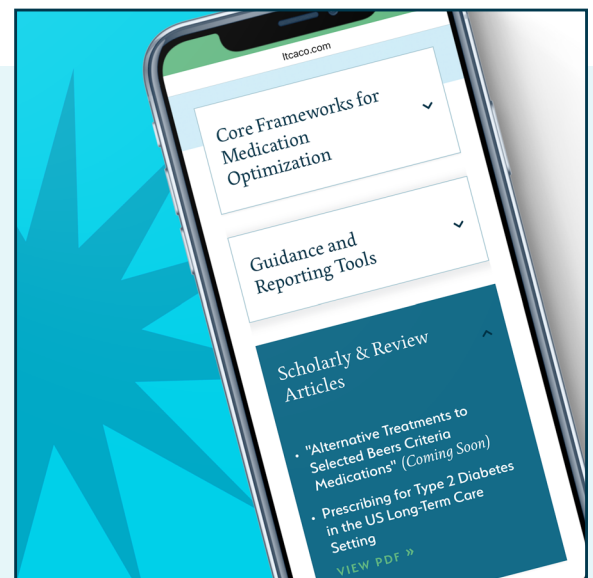
Throughout 2025, we also expanded our clinical performance team and delivered a series of focused practical reports, including patient-specific medications insights (such as opioid and antipsychotics use), as well as reports identifying patients with high ED utilization, high readmission rates, and facility specific information.

Looking ahead to 2026, our clinical team is documenting our robust value based care model called the LTC ACO Way. This will include enhanced tools, timelines, quick reference guides, customizable solutions, and targeted provider support designed to meet each practice where they are and advance their specific initiatives.

Reminder: The 2025 Year End ACP Completion Contest officially closes on December 31, 2025. There's still time to complete ACP's for all eligible 'at-risk' beneficiaries.

## Coming Soon: January 2026

- ♦ **LTC ACO Medication Optimization Digital Library**  
Launching on the Clinical Resource Portal, this expanded digital library will offer clinicians easy access to evidence-based deprescribing tools, medication management guidance, and quarterly therapeutic focus resources - all aimed at improving safety and outcomes for the patients we serve.
- ♦ **New “LTC ACO Community” Email**  
Starting in January, all newsletters, memos, and roundtable invitations will come from our dedicated **communications inbox: Comms@ltcaco**, making updates clearer and easier to follow.



## SAVE *the* DATES

### Implementation Education Series & Performance Year Kick-Off

The final topic of our 2025-2026 Series for new PY26 partners will focus on Quality. A replay of the December 5 session will be posted on our website.

We will host a Performance Year 2026 Kickoff Education Session in late January (date TBD), timed to follow CMS' finalization of quality measure specifications. More information to follow.

### Watch the following replays on the Clinical Resource Portal:

- ♦ Office Hours: Preparing for 2026 PFS Changes - **December 10 replay**
- ♦ Q4 Clinical Roundtable - **December 10 replay**
- ♦ Office Hours: PY26 Flagging Prep - **December replay**

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